Appendices

A1 PAE	
A2 PAE Instruction	ns

- **B1** Individual Rights
- **B2** Title VI Signature Sheet
- **B3** Title VI Explanation
- **B4** Family Model Tip Sheet
- B5 Supported Living Live In Companion Tip Sheet
- B6 Supported Living With Shift Staffing Tip Sheet
- B7 Residential Habilitation Tip Sheet
- B8 Semi Independent Living Tip Sheet
- B9 Determining the Amount of Personal Assistance Tip Sheet

C1 ICAP

- C2 Risk Assesment Tool
- C3 Possible Indicators for Therapeutic Service Assessments
- C4 Sample Therapeutic Services POC
- C4a Therapeutic POC with goals
- C5 Behavior Issues Tip Sheet
- C6 Health Care Oversight Form
- C7 Health Care Oversight Instructions
- **C8 Vocational Evaluation Process**
- C9 Vocational Assessment Basic Information Form
- C10 Vocational Evaluation Supplemental Evaluation

D ISP Meeting Preparation Checklist

- E1 Home Tip Sheet
- E2 Day Activities Tip Sheet
- E3 Relationships and Community Membership Tip Sheet
- E4 Chronic Medical Conditions Tip Sheet
- E5 Allergies Tip Sheet
- E6 Mealtime Issues Tip Sheet
- E7 What Else Is Important to the Person Tip Sheet
- E8 Personal Funds Management Tip Sheet
- E9 Decision Making Tip Sheet
- E10 Communication Tip Sheet

- E11 Other Important Things Tip Sheet
- E12 Personal Outcomes Tip Sheet
- E13 Actions Tip Sheet
- E14 Meaningful and Measurable Tip Sheet
- E15 Rates Tip Sheet
- F1 Documenation Criteria
- F2 Monthly Review of Progress Providers
- F3 Clinical Services Monthly Review Form
- F4 Monitoring Behavior Services
- F5 Other
- F6 Monitoring Therapeutic Services
- F7 Monthly Review Therapeutic

G1 ISP Review Checklist

H1 CM Documentation Forms:

Action Plan Review Form

Additional Activity Form

Annual Review Form

Face to Face Form

Issue Reporting Form

Monthly ISP Review Form

Semi Annual Survey

Periodic Review Form

H2 ISC Documentation Forms:

Annual Review Form

Action Plan

Issue Reporting & Tracking

Monthly Face-To-Face Monitoring

Semi Annual Survey

Additional Activity / Contact Sheet

Periodic Review

- I1 Staff Instructions sample
- I2 Staff Instructions communication
- I3 Staff Instructions mealtime
- I4 Staff Schedule